



Water Resources Program
Application for a Water Right Permit

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JAN 09 2012
WA State Department of Ecology (SWRO)

☒ SURFACE WATER ☐ GROUND WATER ☒ PERMANENT
☐ TEMPORARY ☐ SHORT TERM ☐ DROUGHT

Follow the attached instructions. Attach additional sheets as necessary.

***A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION.**

Section 1. APPLICANT

Applicant/Business Name: <u>Smith, Patrick A</u>	Phone No: <u>360-280-4266</u>	Other No:
Address: <u>3245 68th Ave SW</u>		
City: <u>Tumwater</u>	State: <u>WA</u>	Zip: <u>98512</u>
Email Address (optional): <u>smitty_ap@yahoo.com</u>		

Contact Name (if different from above):	Phone No:	Other No:
Relationship to Applicant:		
Address:		
City:	State:	Zip:
Email Address (optional):		

Legal Land Owner or Part Owner Name of the Proposed Place of Use: <u>Smith, Patrick A</u>	Phone No: <u>360-280-4266</u>	Other No:
Address: <u>3245 68th Ave SW</u>		
City: <u>Tumwater</u>	State: <u>WA</u>	Zip: <u>98512</u>
Email Address (optional): <u>Same as Above</u>		

Section 2. STATEMENT OF INTENT

Briefly describe the purpose of your proposed project: Domestic water supply for a private dwelling

Anticipated length of time to complete your project: 10-20yrs

Water Use List all purposes for which water will be applied to a beneficial use and list quantity required for each.

Purpose(s) of Use	Rate (check one box only)	Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
	<input type="checkbox"/> Cubic Feet per Second (CFS) <input checked="" type="checkbox"/> Gallons per Minute (GPM)		
<u>Domestic</u>	<u>Not more than 10</u>	<u>Approx .45</u>	<u>Continuously</u>
TOTAL:			

For Ecology Use	APPLICATION NO: <u>52-30589</u>	SEPA: Exempt/Not Exempt
Fee Paid: <input checked="" type="checkbox"/>	Check No:	ECY Coding: 001-001-WR1-0285-000011
Date Returned	By	Priority Date <u>1-9-12</u> By <u>SL</u> WRIA: <u>24 Pacific</u>

Short Term/Temporary Water Use

Is this a request for a short term project (less than four months and non-recurring)? ☐ YES ☒ NO

Is this request for a temporary permit? ☐ YES ☒ NO

If yes to either question above, indicate the dates that the water will be needed:

FROM: ____/____/____ TO: ____/____/____

Section 3. POINT OF DIVERSION OR WITHDRAWAL

(Complete A or B, and C below)

A.) If Surface Water Source <input type="checkbox"/> Spring <input type="checkbox"/> Creek <input type="checkbox"/> River <input type="checkbox"/> Lake <input checked="" type="checkbox"/> Other: <u>Stream</u> Source Name: <u>unnamed</u> Tributary to: <u>Bear River</u> Number of proposed diversion points: <u>1</u> Do you have an existing diversion? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	B.) If Ground Water Source <input type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____ Well diameter & depth: _____ Number of proposed points of withdrawal: _____ Do you have an existing well? <input type="checkbox"/> YES <input type="checkbox"/> NO If available, attach Water Well Report and pump test. Well Tag ID No. _____																																																								
C.) Point of Diversion/Withdrawal – Legal Description																																																									
<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>Parcel No.</td><td>1/4</td><td>1/4</td><td>Section</td><td>Township</td><td>Range</td><td>County</td></tr><tr><td><u>10101843012</u></td><td><u>SW</u></td><td><u>SE</u></td><td><u>18</u></td><td><u>10N</u></td><td><u>10W</u></td><td><u>Pacific</u></td></tr><tr><td>Lot(s)</td><td colspan="2">Block(s)</td><td colspan="4">Subdivision</td></tr><tr><td> </td><td colspan="2"> </td><td colspan="4"> </td></tr></table> <p>If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner: _____ Feet (<input type="checkbox"/> North/<input type="checkbox"/> South) and _____ feet (<input type="checkbox"/> East/<input type="checkbox"/> West) from the (<input type="checkbox"/>NW <input type="checkbox"/>SW <input type="checkbox"/>NE <input type="checkbox"/>SE <input type="checkbox"/>____) corner of Section ____.</p> <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>Parcel No.</td><td>1/4</td><td>1/4</td><td>Section</td><td>Township</td><td>Range</td><td>County</td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td>Lot(s)</td><td colspan="2">Block(s)</td><td colspan="4">Subdivision</td></tr><tr><td> </td><td colspan="2"> </td><td colspan="4"> </td></tr></table> <p>If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner: _____ feet (<input type="checkbox"/> North/<input type="checkbox"/> South) and _____ feet (<input type="checkbox"/> East/<input type="checkbox"/> West) from the (<input type="checkbox"/>NW <input type="checkbox"/>SW <input type="checkbox"/>NE <input type="checkbox"/>SE <input type="checkbox"/>____) corner of Section ____.</p>		Parcel No.	1/4	1/4	Section	Township	Range	County	<u>10101843012</u>	<u>SW</u>	<u>SE</u>	<u>18</u>	<u>10N</u>	<u>10W</u>	<u>Pacific</u>	Lot(s)	Block(s)		Subdivision											Parcel No.	1/4	1/4	Section	Township	Range	County								Lot(s)	Block(s)		Subdivision										
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NOTE: If more than two points of diversion/withdrawal attach additional information on a separate sheet of paper.

Do you own the land on which the proposed point of diversion/withdrawal is located? ☒ YES ☐ NO

If no, do you have legal authority to make this application for use of another's land? ☐ YES ☐ NO

Provide the owner name(s), address, and phone number: _____

Section 4. PLACE OF USE

Attach a copy of the legal description of the property (on which the water will be used) taken from a real estate contract, property deed or title insurance policy, or copy it carefully in the space below.

<u>See Attached Description</u>						
1/4	1/4	Section	Twp.	Range	County	Parcel No.

For Ecology Use	APPLICATION NO: _____	SEPA: Exempt/Not Exempt
	Fee Paid: _____ Check No: _____	ECY Coding: 001-001-WR1-0285-000011
Date Returned _____	By _____	Priority Date _____
By _____ WR1A: _____		

Do you own all the lands on which the proposed place of use is located? ☒ YES ☐ NO.

If no, do you have legal authority to make this application for use of another's land? ☐ YES ☐ NO

Provide owner name(s), address, and phone number: _____

Are there any other water rights or claims associated with this property or water system? ☐ YES ☒ NO

If yes, provide the water right and/or claim numbers: _____

Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.

Section 5. WATER SYSTEM DESCRIPTION

Describe your proposed water system (include type and size of devices used to divert or withdraw water from

source): water softener, carbon filter, Pre Treatment Filter,
Pretreatment UV & RO membrane

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

(Complete A or B, and C below)

A.) Domestic Water Systems only

Projected number of connections to be served:

one

Type of connections: Home
(e.g., home, recreational cabin)

B.) Municipal Water Systems only (defined under RCW 90.03.015)

Present population to be served water:

Estimate future population to be served:
_____ (20 year projection)

C.) Water System Planning

Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? ☐ YES ☒ NO

If yes, date plan was approved ____/____/____ Water System Number: _____

Name of water system: _____

Are you within the service area of an existing water system? ☐ YES ☒ NO

If yes, explain why you are unable to connect to the system: _____

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

Irrigation

Total number of acres requested to be irrigated under this application = 05 ACRES

NOTE: Outline the area to be irrigated on your attached map.

Stockwater

List number and kind of stock: N/A

Is the proposed project for a dairy farm? ☐ YES ☒ NO

Other Proposed Farm Uses

Describe all proposed uses: N/A

Family Farm Water Act (RCW 90.66):

Calculate the acreage in which you have a controlling interest, including only:

- Acreage irrigated under water rights acquired after December 8, 1977,
- Acreage proposed to be irrigated under this application, and
- Acreage proposed to be irrigated under other pending application(s).

Is the combined acreage under existing rights greater than 6000 acres? ☐ YES ☒ NO

Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☒ NO

If yes, enter Permit No: _____

Section 8. OTHER WATER USES

Hydropower

Indicate total feet of head N/A and proposed capacity in kilowatts: _____

Describe works: _____

Indicate all uses to which power is to be applied: _____

FERC License No: _____

Mining/Industrial Use

Describe use, method of supplying and utilizing water: N/A

Other Use

N/A

Section 9. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? ☐ YES ☒ NO

Are you proposing to store more than 10 acre-feet of water? ☐ YES ☒ NO

Will the water depth be 10 feet or more? ☐ YES ☒ NO

If you answered yes to any of the above questions, please describe: _____

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point and some portion of the storage will be above grade, you must also complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.

Section 10. DRIVING DIRECTIONS

Provide detailed driving directions to the project site: From State Hwy 101, South
Towards Ilwaco, Approximately 200 yards
West of the Bear River Bridge along the right
side is the entrance to property (old Hwy 101)

Site Address: None assigned, but located in SECTION 10W
Approx 1/2 mile North of MM 18 on Hwy 101

Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

Patrick A Smith
Print Name
(Applicant or authorized representative)

PSmith
Signature

01/09/12
Date

Print Name
(Legal Owner or Part Owner Place of Use)

Signature

Date

Print Name
(Legal Owner or Part Owner Place of Use)

Signature

Date

Print Name
(Legal Owner or Part Owner Place of Use)

Signature

Date

Please check the region in which the project is located:

*Submit your application to: DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611	<input type="checkbox"/> Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902 (509) 575-2490	<input type="checkbox"/> Eastern Regional Office 4601 N. Monroe Spokane, WA 99205-1295 (509) 329-3400
	<input type="checkbox"/> Northwest Regional Office 3190 - 160 th Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	<input checked="" type="checkbox"/> Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300

If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.

